

**HAWAII STATE ETHICS COMMISSION**1001 BISHOP STREET, HONOLULU, HAWAII 96813
or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

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STATE OF HAWAII
STATE ETHICS COMMISSION

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Imanaka	Mitchell	A.	(808) 521-9500
MAILING ADDRESS (Street)			FAX (808) 541-9050
745 Fort Street, Suite 1700			EMAIL
			mimanaka@imanaka-asato.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Imanaka Asato LLLC			(808) 521-9500
MAILING ADDRESS (Street)			FAX (808) 541-9050
57-091 Kamehameha Hwy.			EMAIL
			mimanaka@imanaka-asato.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Turtle Bay Resort, LLC			(808) 447-6956
MAILING ADDRESS (Street)			FAX
57-091 Kamehameha Highway			(808) 232-2396
			EMAIL
			rmakaiau@tbrdevelopment.com
(City)	(State)	(Zip Code)	
Kahuku	Hawaii	96731	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Ralph Makaiau			(808) 447-6954
MAILING ADDRESS (Street)			FAX
57-091 Kamehameha Highway			(808) 232-2396
			EMAIL
			rmakaiau@tbrdevelopment.com
(City)	(State)	(Zip Code)	
Kahuku	Hawaii	96731	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operation & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input checked="" type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input checked="" type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input checked="" type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

(Signature of Lobbyist)

2-13-13

(Date)

PART V AUTHORIZATION TO LOBBY

NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

G. Scott McCormack,

V.P. Real Estate

NAME OF ORGANIZATION (if applicable)

Turtle Bay Resort, LLC

TELEPHONE

(808) 447-6956

MAILING ADDRESS (Street)

57-091 Kamehameha Highway

(City)

(State)

FAX

EMAIL

smccormack@replayresorts.com

(Zip Code)

Kahuku

Hawaii

96731

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

2-13-13

(Date)